

**WASHINGTON. D.C.** – With unemployment rate rising to 10.2 percent (crossing the double-digit threshold for the first time since 1983), representing a loss of 190,000 jobs,

House Committee on Oversight and Government Reform Ranking Member Darrell Issa (R-CA) questioned the sincerity of the Obama Administration and Congressional Democrats today who claim they are “saving or creating” jobs yet continue to advance policies that kill jobs, raise taxes, punish small businesses and adds to our national debt. H.R. 3962, a 1,990 page bill costing nearly \$1 trillion that raises taxes, raises health care costs, punishes California and adds to our national debt while hurting America’s seniors, families and small businesses:

“Despite months of townhalls in which millions of Americans voiced their concerns and opposition to a government-run forced public-option, Congressional Democrats are about to follow Barack Obama and Nancy Pelosi off the cliff to advance a bill that raises taxes, health care costs and fails to provide the quality and affordable coverage the American people have been promised for months,” Issa said. “House Democrats are in a position today to either take ownership of this job-killing, tax-rising bill that masquerades as legitimate health care reform or they can learn from states that have already gone down this road and failed – either way, the American people will ultimately hold them accountable because they know exactly who is responsible.”

**Consider This:**

- Soon after implementation of Tennessee's TennCare program, a single-payer public health option launched in 1994, many employers dropped their employees' private coverage benefit. As a result, **45 percent** of new TennCare enrollees came from private plans, not from the uninsured. Within four years of TennCare's creation, more than one-sixth of the Tennessee population was enrolled in TennCare, expanding the state's cost to nearly one-third of its entire revenue.

- Kentucky didn't do much better with its mid-1990s reform attempt. The Bluegrass State set caps on insurance premiums, required a minimum level of coverage for all insurance packages sold in the state and implemented a community rating system that absorbed the cost of insuring patients with unhealthy habits into the general pool. Within three years of the first substantial reforms, **40 insurance companies left the state**, leaving only two underwriters of individual private plans for more than 4 million people.

**Premiums skyrocketed**

for everybody, options decreased and a state with a 12 percent uninsured population ended up with 16 percent.

- The Empire State's reform efforts have resulted in some of the **highest costs in the nation**. Each year, New York City residents pay an average of \$9,000 for individual coverage and more than \$26,000 for family coverage. This is in part because New York has

**51 insurance mandates**

, some of which include podiatry coverage and hormone replacement therapy.

- Massachusetts is fighting **out-of-control cost increases despite having established an "exchange" — or state health insurance connector — similar to the one now included in one version of the Senate health bill**.

As originally designed for Massachusetts, the insurance connector was to be a marketplace for competition, but because the state sets unreasonably high coverage standards, there are few options and little competition. All of which, mind you, results in higher prices and less access to quality medical care. Because of the influx of newly covered individuals in the state, wait times to visit primary-care physicians can take more than 100 days in some rural areas. As predicted by those who oppose expanded government involvement in health care, Massachusetts is experiencing some of the worst health care rationing in the country.